

SP Form No. 202 (12/98)

**PRELIMINARY**New **RESOLUTION**

"BE IT RESOLVED by the Governing Board, **OR** by the Chief Administrative Officer of those organizations which **do not** have a governing board, and hereby ordered that the official(s) and/or employee(s) whose name(s), title(s), and signature(s) are **listed below shall be and is (are) hereby authorized as our representative(s) to acquire federal surplus property** from the California State Agency for Surplus Property under [these Terms and Conditions](#)."

A.	REPRESENTATIVES NAMES	TITLE	SIGNATURE <i>N/A for Draft form</i>	E-MAIL
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**B.** PASSED AND ADOPTED this  day of , 20 , by the Governing Board of

by the following vote: Ayes: ; Noes: ; Absent:

I, , *Clerk of the Governing Board of*

*do hereby certify that the foregoing is a full, true, and correct copy of a resolution adopted by the Board at a  meeting thereof held at its regular place of meeting at the date and by the vote above stated, which resolution is on file in the office of the Board*

Name of organization

Mailing address

City

County

Zip Code

(Signed) **OR**

**C.** AUTHORIZED this  day of , 20 , by:

Name of chief administrative officer

Title

Name of organization

Mailing address

City

County

Zip Code

(Signed) \_\_\_\_\_

**NOTE: IF YOU HAVE A GOVERNING BOARD, SECTIONS "A" and "B" SHOULD BE COMPLETED.**

**IF YOU DO NOT HAVE A GOVERNING BOARD, SECTIONS "A" and "C" SHOULD BE COMPLETED.**

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Date:

Name of Individual submitting this DRAFT:

E-Mail of Individual submitting this DRAFT:

Title of Individual submitting this DRAFT:

**PRELIMINARY**